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Bib Data Sheet

CONFIRMATION NO. 6116

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|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER 10/010,912 | FILING DATE 12/06/2001 RULE | CLASS 606 | GROUP ART UNIT 3731 | ATTORNEY DOCKET NO. SYN-039D |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|

APPLICANTS

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Name
 ** CONTINUING DATA *****

This application is a CIP of 09/891,775 06/25/2001 PAT 6,716,226

Name
 ** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 01/08/2002

| | | | | |
|---|----------|---------|--------|-------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY | DRAWING | CLAIMS | CLAIMS |
| Verified and Acknowledged Examiner's Signature: <i>Gary Jackson</i> Initials: <i>7 sept 04</i> | FL | 20 | 26 | 3 |

ADDRESS

36822

GORDON & JACOBSON, P.C.

65 WOODS END ROAD

STAMFORD, CT

06905

TITLE

Surgical device having a handle adapted to impart tensile and compressive forces to elements at a distal end of the device

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| FILING FEE | FEES: Authority has been given in Paper | <input type="checkbox"/> All Fees |
| RECEIVED | No. _____ to charge/credit DEPOSIT ACCOUNT | <input type="checkbox"/> 1.16 Fees (Filing) |
| 688 | No. _____ for following: | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |